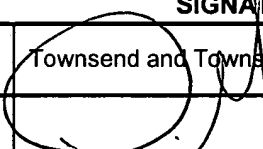
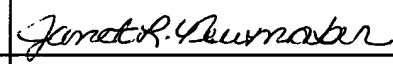
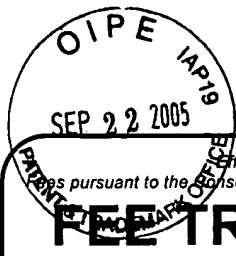


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AF

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|---|------------------------|-----------------|
| PTO TRANSMITTAL FORM (to be used for all correspondence after initial filing) SEP 22 2005 PATENT & TRADEMARK OFFICE | Application Number | 09/940,767 |
| | Filing Date | August 27, 2001 |
| | First Named Inventor | Arnold M. Lund |
| | Art Unit | 2635 |
| | Examiner Name | Clara I. Yang |
| | Attorney Docket Number | 020366-074100US |
| Number of Pages in This Submission | | |

| ENCLOSURES (Check all that apply) | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard |
| Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
| Firm Name | Townsend and Townsend and Crew LLP | |
| Signature |  | |
| Printed name | Darin J. Gibby | |
| Date | September 20, 2005 | Reg. No. 38,464 |

| CERTIFICATE OF TRANSMISSION/MAILING | | |
|--|---|-------------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. | | |
| Signature |  | |
| Typed or printed name | Janet L. Newmaker | Date September 20, 2005 |

Effective on 12/08/2004.
Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 200)**Complete if Known**

| | |
|----------------------|-----------------|
| Application Number | 09/940,767 |
| Filing Date | August 27, 2001 |
| First Named Inventor | Arnold M. Lund |
| Examiner Name | Clara I. Yang |
| Art Unit | 2635 |
| Attorney Docket No. | 020366-074100US |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|--------------|----------|--------------|----------|------------------|----------|----------------|
| | Small Entity | Fee (\$) | Small Entity | Fee (\$) | Small Entity | Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Small Entity | |
|---|--------------|----------|
| | Fee (\$) | Fee (\$) |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | 50 | 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

| <u>Total Claims</u> | | <u>Extra Claims</u> | | <u>Fee (\$)</u> | = | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | |
|---|-------------|---------------------|---|-----------------|---|----------------------|----------------------------------|----------------------|
| 19 | -20 or HP = | 0 | x | \$50 | = | \$0 | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| HP = highest number of total claims paid for, if greater than 20 | | | | | | | | |
| <u>Indep. Claims</u> | | <u>Extra Claims</u> | | <u>Fee (\$)</u> | = | <u>Fee Paid (\$)</u> | | |
| 4 | -3 or HP = | 1 | x | \$200 | = | \$200 | | |
| HP = highest number of independent claims paid for, if greater than 3 | | | | | | | | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| | | | | |
|--------------|---------------|---|----------|---------------|
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
| _____ | - 100 = _____ | / 50 = _____ (round up to a whole number) x _____ | = _____ | |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY

| | | | | | |
|-------------------|----------------|-----------------------------------|--------------------|-----------|--------------|
| Signature | | Registration No. (Attorney/Agent) | 38,464 | Telephone | 303-571-4000 |
| Name (Print/Type) | Darin J. Gibby | Date | September 20, 2005 | | |

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On September 20, 2005

TOWNSEND and TOWNSEND and CREW LLP

By: Janet L. Newmaker
Janet L. Newmaker

**AMENDMENT UNDER 37 CFR 1.116
EXPEDITED PROCEDURE –
EXAMINING GROUP 2635**

PATENT

Attorney Docket No.: 020366-074100US

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re application of:

Arnold M. Lund

Application No.: 09/940,767

Filed: August 27, 2001

For: Unified Paging

Customer No.: 20350

Confirmation No.: 6793

Examiner: Clara I. Yang

Art Unit: 2635

**AMENDMENT UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 2635**

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the final Office Action mailed August 18, 2005, for the above-referenced application, please enter the following amendments and remarks.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

09/22/2005 YPOLITE1 00000080 201430 09940767

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